PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

BUC? - 2 013 - 01 05 - USI

(1082 - 2U)

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			20	20			.	RATE	FEE	OR]	RATE	FEE
FC	DR		NUMBER FILED .		NUME	SER EXTRA		BASIC FEE	 	OR	BASIC FEE	
TC	TAL CHARGE	ABLE CLAIMS	29 minus 20=		* 0			X\$ 9=		OR	X\$18=	
INC	DEPENDENT C	LAIMS	√ minus 3 =		* 0			X43=		OR	X86=	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT							1 1		
* If	the difference	e in column 1 is	less than ze	ero. enter	"0" in c	column 2		+145=	<u> </u>	OR	+290=	22.5
				MENDED - PART II				TOTAL		OR	TOTAL OTHER	770
		(Column 1)	MAILIAN	(Colun	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- C: AIA4	=		X43=		OR	X86=	
<u> </u>	FIRST PRESE			+145=		OR	+290=					
								TOTAL			TOTAL ADDIT. FEE	
		_ ′	ADDIT. FEE (· · · · · · · · · · · · · · · · · · ·	,	ADDII. FEL						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	<u> </u>	=	[X43=	,	OR	X86=	
	FIRST PRESE	NTATION OF MU	TIPLE DEP	ENDENI	CLAIM		!	+145=		OR	+290=	
								TOTAL			TOTAL	
		(Column 1)	A	DDIT. FEE		, ,	ADDIT. FEE L					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CI AIA	= .		X43=		on I	X86=	
	FIRST PRESE	MATION OF MO	LIPLE DEP	ENDENT	CLAIM	ا با	' <u> </u>	+145=		OR	+290=	
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR L	TOTAL	:
***	f the "Highest Nur	mber Previously Par ober Previously Paid	id For IN THIS	S SPACE is	less than	n 3, enter "3."		DDIT. FEE L nd in the app		. "	ADDIT. FEE L umn 1.	